

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Land O'Lakes, Inc., PAC

Full Name (Last, First, Middle Initial)

A. WELCH FOR CONGRESS

Mailing Address PO Box 1682

City Burlington State VT Zip Code 05402-1682

Purpose of Disbursement
contribution to federal candidate

Candidate Name
Rep. Peter Welch

Office Sought: House
 Senate
 President
State: VT District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	8		2	0	1	3

Transaction ID : D146606

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
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Full Name (Last, First, Middle Initial)

B. NOLAN FOR CONGRESS VOLUNTEER COMMITTEE

Mailing Address PO BOX 1041

City BRAINERD State MN Zip Code 56401

Purpose of Disbursement
Contribution to Federal Candidate

Candidate Name
Rep. Rick Nolan

Office Sought: House
 Senate
 President
State: MN District: 08

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	1	3

Transaction ID : D146540

Amount of Each Disbursement this Period

1	0	0	0	.	0	0
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Full Name (Last, First, Middle Initial)

C. ROBERT ADERHOLT FOR CONGRESS

Mailing Address P. O. BOX 1158

City HALEYVILLE State AL Zip Code 35565

Purpose of Disbursement
contribution to federal candidate

Candidate Name
Rep. Robert B. Aderholt

Office Sought: House
 Senate
 President
State: AL District: 04

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	8		2	0	1	3

Transaction ID : D146603

Amount of Each Disbursement this Period

1	0	0	0	.	0	0
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SUBTOTAL of Disbursements This Page (optional)..... ▶

4	5	0	0	.	0	0
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TOTAL This Period (last page this line number only)..... ▶

4	5	0	0	.	0	0
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